

UNITED STATES DEPARTMENT OF COMMERCE Patent and Trademark Office Address: COMMISSIONER OF PATENTS AND TRADEMARK Washington, D.C. 20231

	APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO.
	10/802997			
	DU MOT			EXAMINER
	MAIL			ART UNIT PAPER NUMBER
		INTERVI	DA' EW SUMMARY	TE MAILED:
All p		t's representative, PTO personnel):	
(1)_	MR KUNZU		(3)	
(2)				
Date	of Interview	5/05		
Tyne	Telephonic Televide	Conference Resconsi (con)	is given to □applicant □app	diagnata conconentation)
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Exhi	bit shown or demonstration cor	iducted: ∐Yes ∐No If yes, b	orief description:	
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Desc			ent was reached, or any other com がんしんなしいない	
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must	ller description, if necessary, a be attached. Also, where no c hed.)	nd a copy of the amendments, if a copy of the amendments which wo	available, which the examiner agreed the claims allowable is	ed would render the claims allowable available, a summary thereof must be
	It is not necessary for applica	nt to provide a separate record of	the substance of the interview.	
IS NO action	OT WAIVED AND MUST INCLI	JDE THE SUBSTANCE OF THE I PLICANT IS GIVEN ONE MONTH	trary. A FORMAL WRITTEN REPL NTERVIEW. (See MPEP Section I FROM THIS INTERVIEW DATE T	LY TO THE LAST OFFICE ACTION 713.04). If a reply to the last Office TO FILE A STATEMENT OF THE

Examiner Note: You must sign this form unless it is an attachment to another form.

PRIMARY EXAMINER